

Mail Application to:

List Coordinator
 Administrative Office
 Probate and Family Court Dept.
 2 Center Plaza, Suite 210
 Boston MA 02108

Application

to the
Probate and Family Court Department
 for appointment as
Rogers Monitor
 in

For court use only

Reviewed _____

Entered _____

Rogers and Geriatric Rogers cases, G.L. c. 201, §§ 6(d), 6A(d), 14(a)

Name: _____
(Street and Number)

Firm Name: _____
(Street and Number)

Address: _____
(Street and Number)

(City or Town) (State) (Zip Code)

Telephone No. (_____) _____ B.B.O. # _____
(Area Code)

E-Mail Address _____

CATEGORY



I certify that I was admitted to practice before the Supreme Judicial Court on _____, that I remain in good standing to practice before the courts of the Commonwealth of Massachusetts, and that I have not been convicted of any felony.

I further certify

- ☐ that I have at least three years of experience practicing in the Probate and Family Courts of Massachusetts, including cases involving guardianship and authority to administer antipsychotic medication to wards,
- ☐ that I am certified by the Committee for Public Counsel Services to accept appointments as counsel in *Rogers* cases, **and**
- ☐ that I have the required experience and expertise to serve as a *Rogers* monitor in guardianship cases. G.L. c. 201, § 6(d).

I have currently in effect professional liability insurance with coverage of \$100,000 or more. The insurance company which issued the policy is:

(Name of Company)

The policy number is: _____
(Policy Number)

The limits of liability are: _____
(Limits of Liability)

I request and I **WILL** accept appointments from the following (not more than **four**) divisions of the Probate and Family Court Department:

- ☐ Barnstable ☐ Berkshire ☐ Bristol ☐ Dukes ☐ Essex ☐ Franklin ☐ Hampden
☐ Hampshire ☐ Middlesex ☐ Nantucket ☐ Norfolk ☐ Plymouth ☐ Suffolk ☐ Worcester

- ☐ I further certify that I am certified by the Committee for Public Counsel Services to accept appointments as counsel in care and protection and termination of parental rights cases, and I wish to also accept appointments as *Rogers* Monitor for children.

I understand that I will be required each year, after 2001, to complete six hours of continuing legal education in the guardianship/*Rogers* fields to remain on the list for these appointments. I agree that, if I am appointed as a monitor and a person with an appearance in the case requests a certificate of my professional liability insurance, I will provide the certificate within seven days of the request. I understand that, to remain on the list, I must mail to the List Coordinator each February, after 2001, a certificate of my good standing with the Board of Bar Overseers dated that February.

I have attached to this Application **a copy of my resume** and **a certificate** of my good standing with the Board of Bar Overseers. The certificate was issued not more than 30 days ago.

I certify under the penalties of perjury that all of the above information is true.

Date: _____

(Signature of Applicant)